

CHILD'S NAME: _____	CASE NUMBER: JUVENILE: FAMILY:
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VISITATION ORDER—JUVENILE
Attachment to Custody Order—Juvenile (form JV-200)

1. ☐ **VISITATION**

a. ☐ As set forth in the attached visitation agreement.

b. ☐ Specific visitation as follows:

(1) ☐ **WEEKENDS** (specify starting date): _____

☐ Father ☐ Mother shall have the children with him/her:

☐ First weekend of the month (specify day(s) and time): from _____ at _____ ☐ a.m. ☐ p.m.
to _____ at _____ ☐ a.m. ☐ p.m.

☐ Second weekend of the month (specify day(s) and time): from _____ at _____ ☐ a.m. ☐ p.m.
to _____ at _____ ☐ a.m. ☐ p.m.

☐ Third weekend of the month (specify day(s) and time): from _____ at _____ ☐ a.m. ☐ p.m.
to _____ at _____ ☐ a.m. ☐ p.m.

☐ Fourth weekend of the month (specify day(s) and time): from _____ at _____ ☐ a.m. ☐ p.m.
to _____ at _____ ☐ a.m. ☐ p.m.

☐ Fifth weekend of the month (specify day(s) and time): from _____ at _____ ☐ a.m. ☐ p.m.
to _____ at _____ ☐ a.m. ☐ p.m.

(2) ☐ **ALTERNATE WEEKENDS** (specify starting date): _____

☐ Father ☐ Mother shall have the children with him/her (specify day(s) and time): from _____
at _____ ☐ a.m. ☐ p.m. to _____ at _____ ☐ a.m. ☐ p.m.

(3) ☐ **MID-WEEK**

☐ Father ☐ Mother shall have the children with him/her (specify day(s) and time): from _____
at _____ ☐ a.m. ☐ p.m. to _____ at _____ ☐ a.m. ☐ p.m.

(4) ☐ **Other** (specify day(s) and time(s) as well as any additional conditions):

☐ Continued on Attachment 1b(4).

2. ☐ **SUPERVISED VISITATION**

a. ☐ Father ☐ Mother shall have supervised visitation with the minor children according to the schedule
☐ set forth in item 1 above ☐ to be determined by the parents.

b. The visits shall be supervised by (name):

c. The supervisor's phone number is:

3. ☐ **TRANSPORTATION FOR VISITATION AND PLACE OF EXCHANGE**

a. ☐ Transportation to the visits shall be provided by ☐ Father ☐ Mother
☐ Other (specify):

b. ☐ Transportation from the visits shall be provided by ☐ Father ☐ Mother
☐ Other (specify):

c. ☐ The children shall be delivered and picked up from (specify location):

d. ☐ Other (specify):